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**DECLARATION FOR UTILITY OR** 

Attorney Docket Number

DESIG	iN .	First Named Invento	r Rhode	es				
PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN						
		Application Number						
Declaration Submitted OR with Initial Filing	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date						
		Art Unit						
		Examiner Name						
As the below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Patient Support Pad for Medical Imagina Fauires and								
Patient Support Pad for Medical Imaging Equipment								
		. ,	• .					
	<i>:</i>			·				
(Title of the Invention)								
the specification of which								
is attached hereto								
OR								
was filed on (MM/DD/YYYY)	as United States Ap	as United States Application Number or PCT International						
Application Number and was amended		d on (MM/DD/YYYY)		(if applicable).				
. <b>L</b>		`L						
I hereby state that I have reviewed and any amendment specifically referred to	understand the contents of tabove.	the above identified specific	cation, including	the claims, as amended by				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

PTO/SB/01 (10-01)
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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: Customer Num or Bar Code La			OR 🔽	Correspondence address below			
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:							
Given Name Steven L.  (first and middle [if any])  Rhodes or Surname							
Inventor's Signature				7-24-02 Date			
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City	State		ZIP 32214	Country			
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])  Family Name or Surname							
Inventor's Signature				Date			
				·			
Residence: City	State		Country	Citizenship			
Mailing Address							
City	State	.	ZIP	Country			
Additional inventors are being named on thesu	pplemental Addition	al Inve	ntor(s) sheet(s) PTO/SI				